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New York

President: Mr. Opertti ..... (Uruguay)

The meeting was called to order at 7.05 p.m.

Agenda item 8 (*continued*)

Overall review and appraisal of the implementation of the Programme of Action of the International Conference on Population and Development

The President (*spoke in Spanish*): I now give the floor to Her Excellency The Honourable Billie Miller, Deputy Prime Minister and Minister of Foreign Affairs and Foreign Trade of Barbados.

Ms. Miller (Barbados): In the view of the Barbados Government, our task here at this special session on the implementation of the Programme of Action of the International Conference on Population and Development (ICPD) is to chart the way forward in a new and dynamic global environment. The task is indeed a difficult one, but not impossible.

As we look back on five years of implementing the Cairo ICPD Programme of Action, we observe that, on a worldwide scale, there has been much progress in policy and programme design, in legislative and institutional frameworks and, to varying degrees, increased partnership and collaboration among Governments, United Nations agencies, non-governmental organizations and civil society. Still, there remain many challenges.

The HIV/AIDS pandemic has emerged as a major challenge that seriously threatens recent ICPD achievements. Developed and developing country records show the disastrous toll inflicted by the epidemic, with respect not only to mortality, but also to morbidity. In the hardest hit countries, life expectancy at birth is currently estimated at 47 years and one quarter of the adult population is infected. The number of children orphaned by AIDS is expected to increase to 40 million by the year 2010.

The social and economic losses due to AIDS are reversing hard-won development gains. Its destructive forces pose a fatal threat to men and women alike during their productive years and, in the case of women, especially during their reproductive years. There is a serious need to review the objectives and actions set out in Cairo and to evaluate new goals to arrest the spread of AIDS. In this respect, the international community must strengthen its actions in order to meet key strategic goals in the crisis of HIV/AIDS, as well as in national health and reproductive health services.

Adolescent reproductive health is another major challenge in the implementation of the Cairo ICPD Programme of Action. In 1994, delegates reached a high degree of consensus on issues relating to sexual and reproductive health and the well-being of young people, who today constitute 30 per cent of the world's population. The Programme of Action was specific in outlining the actions required to promote responsible and

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healthy reproductive and sexual behaviour and to substantially reduce all adolescent pregnancies.

The Programme of Action recognized then — as it does now — that the sexual and reproductive health of adolescents is closely entwined with other societal problems and unmet needs. In order to understand them, we must understand their antecedents and take into consideration the familial, social, cultural and economic aspects of their environment. In addition, it must be further recognized that education is the key to understanding the issues associated with adolescent reproductive health. It is also important that young people be involved in the planning, implementation and evaluation of adolescent health programmes.

During the 1980s, the Inter-American Parliamentary Group on Population and Development sponsored a highly successful series of youth parliaments throughout the Caribbean. These parliaments gave young people an opportunity to research and express their views on the causes and consequences of decisions which related to their sexual and reproductive behaviour. One of the positive spin-offs of the exercise, especially in the case of Barbados, was the development of peer counselling, which is being actively pursued by the Barbados Family Planning Association. This model of using young people as advocates to communicate critical messages concerning their sexual and reproductive health is arguably one of the Barbados Family Planning Association's most successful initiatives in the past 10 years.

We cannot speak to issues on population and development without reference to the phenomenon of population ageing, which presents new challenges to our nations, particularly in the area of sustained economic growth. The Programme of Action has provided us with key proposals for future action, which need to be implemented at both the national and the international levels. In order to meet the challenge of population ageing, we will have to comprehensively address the legal, fiscal, financial and labour implications of ageing as they relate to pensions, social benefits, other social services and long-term health-care problems. There must be support for senior citizens which will allow them to play a more productive role in the labour market and in society as a whole.

Barbados is fully aware of and actively engaged in the process of interdependence which links poverty, economic development and the environment. As a small island developing country with limited financial resources, Barbados has embarked on a programme of social transformation intended to embrace the most disadvantaged in our society. As part of the Government's institutional restructuring, a new Ministry — the Ministry of Social Transformation — has been established to work for the eradication of poverty and reform of the social sector to meet the challenges of the new millennium. Greater emphasis is being placed on ensuring the right of every citizen to a decent quality of life.

Barbados remains committed to the goals of the ICPD Programme of Action and has cooperated at the national as well as the regional levels to further its implementation. In addressing male responsibility and participation, the Government of Barbados has insightfully elevated its Bureau of Women's Affairs to a Bureau of Gender Affairs, with the intention of promoting gender equality and to encourage and enable men, as well, to take responsibility for their sexual and reproductive behaviour and their social and family roles.

The post-ICPD years have witnessed a general increase in activities in the Caribbean focusing on young people and organizations working with youth. These activities culminated in the United Nations Population Fund (UNFPA) Caribbean Youth Summit, held in 1998, on adolescent sexual and reproductive health rights. The Summit produced a Caribbean regional declaration and a regional plan, which called for the creation of reproductive health and social services for youth that are founded on the ICPD Programme of Action.

Finally, I should like to refer to the last challenge. Inadequate resources for implementing the Cairo Programme remain a burning issue. The Programme of Action estimated that the implementation of its population and reproductive health component would cost $17 billion by the year 2000, with two thirds coming from national resources and one third from the donor community. Since the first enthusiastic flow of financial aid, donor fatigue has set in and the flow has ebbed.

This development is a serious setback, particularly since the donor community plays an important role in financing population programmes in developing countries. We live in an interdependent world. All countries should therefore strive to meet the committed target for assistance in order to re-energize the implementation of the ICPD. In our view, the United Nations Population Fund has met the challenge of the Cairo Programme with great resolve and effectiveness. We would urge that

increased resources be made available to UNFPA, which bears major responsibility at the multilateral level for follow-up and implementation.

As we know, life is about choice and change. As agents of change, we have the tremendous opportunity and potential to make and influence the choices which will augur a better quality of life for all of us as we approach the twenty-first century. We know that we are not expected to complete the task; but neither are we at liberty to abstain from it.

The President (*spoke in Spanish*): I now call on His Excellency Mr. Miguel Abdon Saguier, Minister for Foreign Relations of Paraguay.

Mr. Saguier (Paraguay) (*spoke in Spanish*): Paraguay is pleased to be able to affirm that, with the support of the Government and civil society, it has laid the foundations for the institutional support of the Cairo Programme of Action, based on the commitments undertaken to achieve the goals set at that important meeting.

Far from representing mere compliance, this is an encouraging situation and motivates us to continue to work with determination, as we accept fully that such serious problems will not be resolved through isolated and short-lived actions. They will require short-term and long-term policies, as well as arduous daily work, the pooling of the efforts of the entire national community and the benefit of international support.

For our present Government, the improvement of the quality of life of the population takes priority. In this context, not only do we fully take part in and implement the population and development programmes promoted by the United Nations Population Fund, but we consider the Fund's underlying goals to be in our national interest. That is evidenced by the fact that we are represented in this Assembly at the highest level.

The close link between population and development and other fundamental elements — such as human rights, gender equity, social development, health, education and support for the family as a basic unit of society — have made them into key actions and ongoing concerns for our Government.

In the light of the commitments undertaken in the Cairo and Beijing Conferences, important progress has been made in overcoming the obstacles to legal and true equality between men and women in Paraguay.

Since the beginning of the democratic transition, various legal reforms have taken place, starting with a new national Constitution and civil, labour and penal codes. The creation in 1993 of a governmental entity at the highest State level, namely the Ministry for Women, which is charged with incorporating the gender perspective into public policy, and the establishment in 1999 of Ministries for Women in regional and municipal governments are evidence of further institutional progress.

With the goal of incorporating the commitments undertaken by the Republic of Paraguay with respect to the Programme of Action and on the basis of those commitments, we would like to draw attention to the following achievements: the equal opportunity plan for women, which became State policy in 1997; the 1994 educational reform; and the 1995 programme of equality for women in education.

Another important measure adopted by my country's Government in the framework of health-care reform is the creation of the National Council for Reproductive Health, set up in 1994 with the participation of the public sector and civil society, with a view to implementing to implementing the national plan in that area. In the context of that plan, we would like to draw the Assembly's attention to certain indicators that we believe represent progress and to others that continue to present a cause for concern.

In 1987, 38 per cent of the population of reproductive age had access to some kind of family planning. In 1998, the figure reached 59 per cent. The overall fertility rate of the population between 15 and 44 years of age was 4.6 pc. cent between 1987 and 1990; for the period 1995-1998 the figure drops to 4.1 per cent. A total of 89 per cent of pregnant women received prenatal care at least once, and of these women, 72 per cent did so through the public sector. Furthermore, 59.4 per cent of births were institutional, while 38.8 per cent took place at home. In this respect we would like to point out that a midwife training programme has been developed by the Ministry of Public Health and Social Welfare.

From 1982 to 1995, the maternal mortality rate reached 190 per 100,000 live births, attributable to preventable causes. The infant mortality rate is estimated at 40 deaths per 1,000 live births. Life expectancy at birth has improved in Paraguay, according to the 1998

United Nations *Human Development Report*. The figure for women is 71.4 years, for men 66.8.

A significant fact that makes clear the awareness of the Government and of society as a whole is the development of reproductive-health programmes that include the armed and police forces. Implemented since 1998, their basic goal is to eliminate gender stereotypes. It is noteworthy that reproductive-health training has been carried out in a decentralized way and with community participation. Although some gains have been registered, certain negative indicators remain that will be overcome as we broaden the programmes of action. I should like also to point out that under the new Constitution we are promulgating new laws that promote women and the family.

Young people represent a large part — 40 per cent — of the population of Paraguay, and that sector is accordingly viewed as a key element of the country's public policy.

As was pointed out yesterday, in the year 2000 6 billion people will inhabit the world. This figure is extremely disquieting when compared with economic growth indices. Strong demographic growth in the absence of an adequate population policy would undoubtedly constitute an obstacle for our countries, since any efforts made in the fields of health, education and employment would then be ineffectual.

Greater cooperation and investment in the three critical areas mentioned earlier, coupled with an adequate programme of reproductive health in the framework of respect for life, will be key tools for achieving human development in our countries.

We are very motivated in this respect by the progress achieved, which has been the result of considerable efforts. We have overcome many difficulties and obstacles, but we know that the situation is serious and disquieting. For that reason we have done our best to make some headway.

We would like to reiterate at this important session once again our strong resolve and pledge to make determined efforts to achieve the noble and important objectives that we have set for ourselves.

The President (*spoke in Spanish*): I give the floor to His Excellency Eduardo Latorre, Secretary of State for Foreign Affairs of the Dominican Republic.

Mr. Latorre (Dominican Republic) (*spoke in Spanish*): The Government of the Dominican Republic wishes to express its profound satisfaction at participating in this special session of the General Assembly, at which we will consider and appraise the implementation of the Programme of Action of the International Conference on Population and Development.

The Dominican Government is convinced that as an overall expression of society, the population is the most dynamic manifestation and reflection of all of the economic, social and cultural aspects of our country.

The Dominican population has experienced dramatic changes in the last three decades. We have gone from 4 million to approximately 8 million inhabitants since 1970, and the population growth rate, on a five-year basis, declined from 2.4 to 1.7 per cent in that same period. The fertility rate has decreased from seven children per woman in the 1960s to approximately three at present, although differences still exist from area to area.

Life expectancy at birth has increased, rising from 64 years in the 1980s to 70.3 today, which means that the quality of life of the Dominican people has improved. Our human development index is 0.720 per cent, which places us fifth among the 11 Latin American and Caribbean countries with an average human development index.

Since 1996 the Dominican Republic has experienced sustained growth as a result of the economic policies of the Government of Mr. Leonel Fernández, which have resulted in an increase of 7.3 per cent in the gross national product, recognized by international organizations such as the Economic Commission for Latin America and the Caribbean as the highest in the world. Also noteworthy is a sustained increase in social spending of at least 30 per cent annually in the areas of productive employment, education, health and housing.

In the area of education, spending has increased by 44.2 per cent over the past two years; in the area of health care, 30 per cent; in social assistance, 60 per cent; and in housing, 300 per cent.

As a democratic Government, we base our public policies on the recognition of the Universal Declaration of Human Rights. We therefore endorse the principles supported by the Programme of Action adopted in Cairo in September 1994, indispensable components of sustainable development that place the human being at the

centre of development policies, accord women their rights and inspire measures in the field of population, including for reproductive health.

The Cairo Programme of Action has allowed the Dominican Republic to institutionalize new approaches, language and concepts in the field of population and development. It has promoted action programmes, changed the vision and determination of the Government and ultimately substantially modified the quality of life of different population segments, such as women, youth and children.

The Dominican Government has made reproductive health an essential component of its population and development vision, in the understanding that, in the demographic transition the world is experiencing, the countries with the lowest reproductive health indicators often encounter difficulties in their pursuit of development.

Five years after Cairo, the Dominican Government has integrated reproductive health services and made gender a cross-cutting component of these services. Efforts to incorporate male responsibility for reproductive health have also been increased. Strategies have been designed and applied to meet the reproductive-health needs of adolescents and youths.

As regards gender, the Dominican Republic can show progress, such as the enactment and application of Law 24-97, which modifies the penal code and the code of criminal procedure by which those who engage in domestic violence and violence against women, rape, discrimination or the abandonment of girls, boys, adolescents and the family are penalized. In 1997, the electoral law was modified to assign women a quota of 25 per cent of the congressional and municipal elective positions, and every day more women are given relevant positions in public administration. Other laws include the Code for the Protection of Boys, Girls and Adolescents and modifications of the agrarian reform law to include women and the family unit as subjects of agrarian reform.

A new general education law has been enacted and applied. The law includes the right to education without discrimination, *inter alia*, on the basis of sex. It grants equal educational opportunities to all and establishes equal rights for men and women.

On behalf of the President of the Dominican Republic, Mr. Leonel Fernández, I reiterate the firm decision of our Government to support the Programme of Action of the International Conference of Population and Development approved in Cairo in 1994; the report of the Hague Forum, held from 8 to 12 February this year; and the document drafted for the special session on population and development, which summarizes the major effort that has been made to support the Cairo principles. We are committed to the formulation and enactment of a national population and development policy, the reformulation of a general immigration law and the decentralization of national population policies to the provincial and local levels.

The Dominican Republic further commits itself to undertake the necessary efforts to strengthen its actions to comply with the Programme of Action, of which we are signatories. We will focus on the creation of a favourable environment that guarantees the implementation of population programmes; the promotion of equality and equity between the sexes and the empowerment of women; the promotion of reproductive health; and the strengthening of associations and the mobilization of resources.

On behalf of my Government, allow me to appeal to all countries represented here to increase their contributions to development programmes through the United Nations Population Fund (UNFPA), in compliance with the commitments made in Cairo. We will continue to develop strategic alliances between the Government and civil society to ensure the fulfilment of the commitments we make here at Cairo+5. In this context, our Government believes that non-governmental organizations must participate in the implementation of the population and development programmes and contribute actively to national, regional and international debates on this item.

We take this opportunity to express the gratitude of our Government to UNFPA for its important support for our population programmes, especially in the field of reproductive health, gender issues, data-gathering, the creation of public awareness and the design of public policies. This support has helped us to reduce the number of maternal and infant deaths in our country and to develop local capacities for compliance with the Cairo agenda.

Finally, we would like to assure the Assembly that Cairo is a reality in the Dominican Republic. In fact, on behalf of the Government I have the honour to represent, let me say that we will exploit Cairo+5 as a new opportunity in our population efforts to guide the destiny

of our country in accordance with democratic, participatory rules based on humanism, the fight against poverty, solidarity, equity and social justice, in the full confidence that our population is our most important and valuable resource.

The President *(spoke in Spanish)*: I now give the floor to Her Excellency Mrs. Bruce Mariama Aribot, Minister for Social Affairs, Advancement of Women and Childhood of Guinea.

Mrs. Aribot (Guinea) (*spoke in French*): First, I would like to thank all of those who have helped to organize this special session of the General Assembly on population and development. I would like particularly to cite the United Nations Population Fund for its tireless efforts to find comprehensive solutions to problems involving population and diplomacy. This very timely theme that brings us together today is a challenge to the entire international community. Three world conferences — Bucharest, Mexico City and Cairo — have emphasized the complexity of the relationship between population growth and sustainable development. The reports prepared and submitted by the Commission on Population and Development of the Economic and Social Council at last March's special session show how closely these issues are related. International conferences have provided an opportunity to shed more light on the nature and importance of these links and to propose plans of action. Various countries are making enormous efforts to implement the Cairo Programme of Action.

As regards the Republic of Guinea, the Declaration on Population Policy adopted in 1992 was revised in 1996 to take into account the Cairo recommendations. This policy Declaration is designed to ensure a balance between population growth and available resources. It has six long-term objectives: controlling population growth; improving the status of women; protecting vulnerable groups; protecting the environment; integrating demographic variables into the development planning process; and data gathering, analysis and distribution as well as strengthening the data-gathering infrastructure.

The Declaration on Population Policy was translated into a population programme which was adopted by the Government in May 1999. In order to carry out this programme, the Government has set up coordination structures and machinery at the national and local levels that stem from a decentralized and participatory concept. The objective is to focus greater attention on local areas and to stimulate participation by grassroots organizations, the private sector and non-governmental organizations in the elaboration, implementation and appraisal of the population programme.

The population programme translates the Declaration on Population Policy into operational action. It identifies 59 projects, half of which pertain to general health, reproductive health, the campaign against sexually transmitted diseases, including AIDS, and maternal and childhood health, in particular that of adolescents. These projects also target the social, economic and political development of women, towards which the Government of Guinea emphasizes the promotion of women's civil and political rights, their right to education and training, the anti-poverty campaign and strengthening the institutional framework for the promotion of their status.

Moreover, all the current large-scale development programmes — the National Programme for Human Development, the Support Programme for Village Communities, and so on — take the objectives of the population policy into account. This translates into improved social demographic indices. Thus, life expectancy has risen from 45 years in 1984 to 52 today; infant mortality has fallen from 136 to 124 per thousand; and contraceptive use is now at 6.5 per cent, compared to 2.5 per cent in 1990.

Progress has certainly been made, but much is yet to be done. Despite political involvement and juridical and administrative measures, the implementation of the population programme has met with many difficulties, especially that of inadequate financial resources.

While praising the efforts of the donor countries, I would nevertheless express my concern at the paucity of resources raised to implement the Cairo Programme of Action. Most of our economies are fragile and faced with numerous hurdles. The growth of poverty and the continual decrease in personal revenue hardly favour the financial involvement of populations and decentralized agencies in the implementation of population programmes. Thus, the highly indebted developing countries are more than ever in need of international assistance in implementing their population and development programmes.

Moreover, every country has its own specific problems. Guinea, for instance, is hosting 700,000 refugees — equivalent to one tenth of its population — from neighbouring countries that have undergone internal conflicts in the past eight years. In some regions, the

refugee population is larger than the local. We are compelled to take the presence of these refugees into account when seeking solutions to population problems in particular and development problems in general.

That is why, at this special session of the General Assembly, I wish to reiterate my Government's pressing appeal to the contributor countries to increase their financial assistance to population and development programmes. That is the price for the implementation of the ICPD Programme of Action. That is the price of a better world for the six billionth inhabitant of the Earth and all those children to be born in the third millennium.

The President (*spoke in Spanish*): I now give the floor to Her Excellency Ms. Lise Bergh, State Secretary for Gender and Equality Affairs of Sweden.

Ms. Bergh (Sweden): Let me begin by saying that Sweden aligns itself with the statement made by representative of the European Union.

The International Conference on Population and Development (ICPD) in Cairo five years ago was a remarkable achievement. It broke new ground and revitalized and carried forward the discussion on population and development. It also recognized that human rights include reproductive rights. My Government reaffirms its commitment to the goals and content of ICPD. In this context, Sweden wishes to emphasize that, in our view, sexual rights are also human rights.

Since the adoption of the Programme of Action, impressive progress has been made in many countries. A number of Governments and civil society organizations have contributed to implementing the Cairo agenda. The process leading up to this special session of the General Assembly has facilitated a dialogue centred on major outstanding concerns. As time is short, Sweden would like to focus on four issues where there are reasons for alarm.

The overarching issues on the ICPD agenda are crucial to development — politically, economically and socially. One is that of the rights and needs of youth. Never before has this planet witnessed such a large proportion of young people. About 1.2 billion of the world's inhabitants are youths. It is important to realize that young people are living in a world where change is taking place at breakneck speed. On the threshold of an emerging millennium that will be theirs, young people have claims, expectations and hopes. Among the threats facing young people in their early years are HIV/AIDS and sexually transmitted diseases. In and out of school, youths have a right to preventive means, such as education about sex and reproductive health, and to confidential reproductive-health counselling and services. Sexuality is a reality and a strong force in life and needs to be recognized and addressed accordingly.

There is a need for an environment and attitudes that can foster equality in relations between women and men. Traditional male behavioural models must be recognized and challenged. Male violence against women and irresponsible male sexual behaviour must be confronted.

Another very important issue in this context is the empowerment of women. Empowerment of women is about equal participation and equal representation at all levels of the political process and public life; it is also about economic, social and reproductive rights. Great disparities remain in legal and traditional status, health and education between women and men. This is unacceptable. The exposed and disadvantaged situation of girls and young women needs especially to be addressed.

Gender equality is thus at the heart of the Programme of Action. Gender is not a synonym for "female". Gender is about relations between women and men, and a key to this relationship is the redistribution of power between women and men. Women's empowerment is therefore an imperative for gender equality and absolutely essential to the achievement of sustainable development. But it is important to recognize that women's empowerment also leads to changes in traditional male roles and behaviour. Swedish experience indicates that men stand much to gain from this process.

Events since Cairo have, furthermore, brought to the forefront two issues of substance. One is HIV/AIDS. The other is maternal mortality.

Already in Cairo, HIV/AIDS loomed as a threat to many societies, especially in Africa. Since then, the menace of HIV/AIDS has grown and is also making its presence felt in other parts of the world. Estimates show that current resource needs for the prevention, treatment and care of HIV/AIDS exceed by at least three times the amount noted in the Cairo Programme of Action. The demands for more resources and more action are urgent.

It is all the more alarming that they are not yet forthcoming. Some societies are shying away from the realities of the situation and avoiding coming to grips with it. This state of affairs cannot and must not

continue. We should all put more resources into the struggle against HIV/AIDS.

The fact that maternal mortality is still a serious issue is another deeply disturbing fact. Conservative estimates show that the death toll from maternal mortality is at least the equivalent of three jumbo jets loaded with women passengers crashing every day, year in and year out. Many of the victims are young girls. This is a horrendous but persistent figure. Ninety per cent of maternal deaths take place in Africa and some parts of Asia. It is the single health factor that shows the greatest disparity between developed and developing societies. One of the disgraceful aspects of the statistics for maternal deaths is that the solutions to the problem are well known, and yet progress is at a standstill. If any category of deaths is unnecessary and shameful, maternal mortality, with its high rate, is surely one of them.

In many instances, the deaths are caused by illegal and unsafe abortions. Sweden's view is that abortions should be legal and should be decided by the woman. However, the complications of abortion should consequently be addressed irrespective of the legal status of abortion. It is imperative that all societies do their utmost to ensure that abortions are safe and rare.

A persistent theme throughout most of the ICPD Programme of Action is the struggle against poverty. The allocation of resources to meet the ICPD agenda is thus a challenge nationally and internationally. ICPD+5 has shown that, by and large, Governments have failed to respond adequately to the call in Cairo for more resources. Apart from a handful of States, the developing countries have not lived up to the ICPD goals. Nor has the donor community, which has met only about a third to half of what was expected. This is just not good enough. My Government is committed to the United Nations target of 0.7 per cent of gross national product for development cooperation.

We must furthermore bear in mind that it is not only action by Governments that is essential. The role of civil society organizations, such as non-governmental organizations and local community groups, is especially significant. They are partners in the task of putting the Programme of Action to work. They are an equally indispensable part of democratic pluralism and provide a means for ordinary people to express their priorities and influence decision-making.

As I noted initially, the process leading up to this special session and the developments since Cairo have in some respects been positive. However, the document before us falls short of what my Government hoped for. We feel that it could be more action-oriented and forward-looking. Much is still a repetition of the Cairo Programme of Action. The areas that I have touched on are examples of concerns where we feel that the document could have taken us further.

I would like to sum up by saying that at first glance these areas — the rights and needs of youth, gender equality, HIV/AIDS and maternal mortality — appear to be very different in nature. However, when considering them, we realize how much they are interrelated and dependent upon each other.

The younger generation — the stakeholders in the future of our planet — will sooner or later take stock of what we have achieved. Will they judge us to have done too little or been too noncommittal, or say that our actions were too diffused? Or will they say that we understood the challenges ahead and faced up to them? Politically and developmentally, the world is at a crossroads, and ICPD+5 is part of that scene. Let us all, as individuals and as Governments, live up to the plan of action that we all agreed on at Cairo. The time for action is now.

The President (*spoke in Spanish*): I call on His Excellency Mr. Jean André, Secretary of State for Population of Haiti.

Mr. André (Haiti) (*spoke in French*): I have the honour this evening to join the voice of the Republic of Haiti to those of all the States that, on the occasion of the twenty-first special session of the General Assembly, have come to renew their support for the continued implementation of the Programme of Action of the 1994 Cairo Conference.

This action is even more important because, at the dawn of the third millennium, the developing countries are especially concerned by the alarming living conditions of their populations, as highlighted by indicators which are heavily affected by socio-demographic determining factors. Indeed, in most of these Third World States today, infant and maternal mortality rates, the spread of HIV/AIDS and early and unwanted pregnancies continue to be the subject of major concern for officials.

The Republic of Haiti is one of the main countries involved in this situation. Indeed, in 1994 my country, which has approximately 8 million inhabitants, had an infant mortality rate of 74 per 1,000 and a maternal mortality rate of 456 per 100,000 live births. The prevalence of AIDS is estimated at approximately 7 per cent of the urban adult population and at 4 per cent of those living in rural areas. Approximately 22 Haitians are born every hour in a land that does not guarantee them an adequate quality of life: only 1.5 per cent of the land is covered with natural vegetation, and the annual per capita income is $250.

In this small Caribbean country, which is fighting to regain its title of "the pearl of the Antilles", population pressures make it difficult to meet basic needs and have a considerable effect on the quality of the environment. If its growth rate remains stationary, the population will rise from 7 million to 10 million by the year 2010 and, by the year 2040, to about 20 million — a figure three times greater than the current one.

The Government of the Republic of Haiti, in the many actions that it has carried out for years to try to deal with this problem, attaches considerable importance to promoting reproductive health and particularly to family planning, childhood disease programmes, control of HIV/AIDS, sex education for young people and access for young people to health care and reproductive services.

However, with regard in particular to family planning, which has not risen above 18 per cent, it is important to emphasize cultural aspects of the mentality of rural Haitian parents, who consider their children to be insurance for old age or guaranteed agricultural labour on family lands. In most disadvantaged urban areas, pregnancy will in most cases guarantee economic support for a woman by her partner at the time. This is one example of the many issues which show the complexity of the population problem and why, in order to deal with them, it is necessary to adopt approaches that affect the various determining factors.

In this context, the Programme of Action of the Cairo Conference, to which the Republic of Haiti subscribed, provided an historic opportunity for setting out and directing its population and development actions. Important actions include the creation within our State system of the Ministry for the Status of Women and Women's Rights, an important aspect of whose mission is to revise or elaborate, or to watch over the elaboration of, laws safeguarding respect for the rights of women; the Ministry for the Environment, which, with the broad participation of civil society, has just finalized the national environment plan; and the National Migration Office, which is in the process of laying the conceptual bases for migration policy.

We should also mention in the same context the creation of the Secretariat of State for Population, which I have the honour of heading, whose crucial mission is to work for the formulation, implementation and follow-up of a national population policy adapted to the socio-economic and cultural conditions of the country and based on sustainable human development.

Along with these structural activities, it is important to stress the integration of sex education into the curricula of primary schools, which should foster a later onset of sexual activity and a decline in the number of early pregnancies.

There have been other noteworthy gains in the implementation of the Programme of Action. An active partnership between the public sector and non-governmental organizations has promoted and strengthened the delivery of health and reproductive-health services and sex education for young people. South-South relations have been systematized through growing cooperation between our country and Cuba, whose substantial assistance in terms of qualified human resources and the granting of scholarships has enabled the Haitian health-care system to increase the coverage and quality of its services throughout the country. A national census for January 2000 is under way, as is a national survey on morbidity, mortality and the use of services. Also, the Ministry of Social Affairs and Labour has set up a family code.

Finally and above all, health, reproduction and family planning elements have been integrated into a minimum services package to which each and every Haitian, in accordance with our national health policy, must have access. This positive development is cause for optimism, as is the broad participation of civil society in the promotion of women's rights and in the fight against the spread of HIV/AIDS.

As can be seen, even though the indicators mentioned earlier depict a situation that is critical, to say the least, it should be acknowledged that we in Haiti have the political commitment and the institutional bases to continue to implement the Programme of Action of the Cairo Conference. We are in the process of strengthening the capacity of our health-care system, providing quality

health services to the great majority of the population, and preparing a national population policy with the participation of all governmental sectors and of civil society. What we lack is above all the financial means.

For that reason, while we thank the international community for the support it has always given us, we ask it to continue to render its assistance in order to consolidate the actions already under way in Haiti within the framework of the implementation of the Programme of Action of the Cairo Conference.

The President (*spoke in Spanish*): I give the floor to His Excellency Mr. Elhadj Seydou Gassama, Secretary-General of the Ministry of Youth of Mali.

Mr. Gassama (Mali) (*spoke in French*): It is a particular pleasure for me to take the floor on behalf of the Ministry of Health, Solidarity and the Elderly of Mali to make our contribution to the work of the twenty-first special session of the General Assembly, which is charged with the overall review and appraisal of the implementation of the Programme of Action of the International Conference on Population and Development (ICPD).

May I first of all commend you, Mr. President, on your election and welcome the wisdom with which you have been guiding our work.

Mali, like other countries of the Sahel and of Africa, faces population problems that pose challenges to its harmonious economic and social development. Infant and maternal mortality rates — 123 per 100,000 and 577 per 100,000 live births, respectively — remain among the highest in the world. Pregnancies tend to be numerous, in close succession, early or late. The population is increasing at a very rapid pace and is distributed unequally throughout the national territory. Furthermore, significant internal and external migrations have taken place.

All this has resulted in the heightened deterioration of the environment, poor health-care coverage, rising unemployment among young people, and a low level of literacy and school attendance, to cite but a few problems.

The Assembly will understand, then, the immense hope given us by the adoption of the Programme of Action of the International Conference on Population and Development in September 1994 in Cairo, in that this was a decisive turning point in the integration of population problems into development strategies.

The Government of the Republic of Mali is firmly convinced that the effective implementation of the Programme of Action of the International Conference on Population and Development will consolidate the bases for sustainable development and economic growth in conditions of equality and justice.

Following several years of the implementation of the recommendations of the 1994 ICPD, it is important to proceed, as we are doing today, to an evaluation, however brief, of the results achieved. I am pleased, therefore, to recall the following gains made by my country.

With respect to the creation of an environment conducive to the implementation of the ICPD's recommendations, my country has already laid important groundwork and has achieved impressive results. For instance, it has drawn up a plan of action on population for the period 1994-2000, a strategic plan that emphasizes the operational nature of demographic strategy, with a view to making basic social services more easily accessible.

In this framework, the Government of the Republic of Mali has drawn up various plans of action that are undoubtedly helping to achieve the objectives of the Cairo Conference. These include the plan of action for the advancement of women (1996-2000); the 10-year plan for health and social development (1998-2007); the 10-year plan for the development of education (1998-2007); the national plan for environmental action; the national plan for reproductive health; and the priority investment plan for population.

In January 1996 Malian authorities organized a seminar on renewed planning that allowed us to define the new outlines of a planning and management system. These are part of a long-term plan, taking into account the decentralization process, giving pride of place to the environmental dimension and to the development of human resources, with particular attention paid to the role of women, and relying on the cooperation and participation of all protagonists.

In addition to these actions, let me refer to the creation of a ministry for the advancement of women, children and the family; a ministry for the advancement of youth; and a parliament for children, which shows the importance we attach to advancing the status of young people and women.

In the area of health and reproduction, the sectoral health-care policy underlying the health-care and social development programme and its medium-term plan demonstrate the Malian vision of health care. This 10-year plan — 1998 to 2007 — today represents the framework for the development of our health-care system.

The sectoral health-care policy is based on the principles of equity, social justice and solidarity and takes into account people's legitimate aspirations to well-being and the role in society of individuals, families and communities, non-governmental organizations and health-care professionals. It devotes special attention to the specific needs of women and to the problems of the elderly. It is based on our fundamental values and on the commitments undertaken by our country at the international level.

For that reason, several programmes and projects implemented by the Government's technical services and by non-governmental organizations have enabled us to promote the implementation of specific aspects of reproductive health care. The ability of women freely to access family-planning services and the decentralization of health-care services through the creation of community health centres represent a major step forward.

In the area of gender equality, equity for women and their advancement, a policy to advance the status of women — designed to mitigate inequities between the genders — has been drawn up with the goals of improving the image of women in society; fostering access by women to economic resources and means of production; and facilitating access to health-care services by women and children.

The actions undertaken in the areas of information and public awareness, training, promotion of economic resources for women, and institutional and financial support for entities charged with helping to advance the status of women as well as for women's groups and associations have helped to provide data on women, to establish equality between girls and boys in formal and informal education, to promote the use by women of reproductive health-care services, to increase women's economic power and management capacity and to raise awareness of the status and rights of women. Particular attention has been given to education and to improving the image of young girls.

The following activities are also allowing for better representation of women in decision-making.

In the area of strengthening coordination and partnership with civil society, several institutions of civil society have become involved in population activities in Mali. Non-governmental organizations, associations and various groups working in collaboration with sectorial departments are active in various areas. Their work is aided by such favourable conditions as the establishment of individual and collective freedoms, a change in the relationship between the State and the citizens and the promotion of decentralization.

In the area of communications, taking advantage of the democratic movement and the resultant liberalization of the media, the press in Mali has grown considerably. As part of a very ambitious programme, journalists are organized in a network of communicators concerned with population questions. It remains to provide journalists further professional training on population questions. Furthermore, a national population project has disseminated a great deal of information and has heightened public awareness about excision, violence against women and literacy training for small girls.

All of these activities have had significant impact on the development of the situation in my country. School attendance by small girls has increased substantially, and many of the women who had been performing excisions have officially and publicly ceased their operations. The creation of a national committee to combat harmful practices will help to reduce the occurrence of excision.

In the area of environmental protection, in order to highlight the importance of this activity and its link to development questions, a ministry has been established. Mali is continuing to implement its national environmental action plan by means of educational campaigns, and people are being informed about environmental preservation.

In the area of mobilizing resources to finance the implementation of the Programme of Action of the International Conference on Population and Development, the State has allocated substantial financial resources to social sectors. Development partners have worked with the Government of Mali to finance its population policy. The basic financing is provided by external assistance. No structure for coordination and management of this assistance currently exists, even though efforts are under way to correct this shortcoming. Moreover, it is difficult to give accurate figures regarding the multisectorial quality of activities or the contribution of all partners to the implementation of the Cairo Programme of Action.

These are, very briefly, the several accomplishments of my country since the ICPD in Cairo. It can be seen that the implementation of the Programme of Action has faced many obstacles, including the lack of financial and human resources, the lack of intersectorial coordination machinery, the persistence of cultural and traditional practices and attitudes and the continuing drop in development assistance.

In conclusion I would like to stress my Government's enthusiasm for the efforts made by the United Nations system as a whole and by the United Nations Population Fund in particular to provide this opportunity for nations to dialogue and learn.

The President *(spoke in Spanish)*: I now give the floor to His Excellency Mr. Jorge Pérez-Otermin, chairman of the delegation of Uruguay.

Mr. Pérez-Otermin (*spoke in Spanish*): The International Conference on Population and Development in Cairo in 1994 was a key moment in the evolution of the thinking and action of the international community on the issue before us.

Uruguay attends today with the satisfaction of being able to say that in these last five years the very greatest possible efforts have been made to comply with the goals laid down. We find ourselves fully involved in the task of developing programmes and establishing adequate policies in keeping with the recommendations made in the Cairo Programme of Action.

Having been faced with some economic and financial difficulties, we have focused fundamentally on three important areas: the reduction of poverty, the right to sexual and reproductive health, and the promotion of equity and equality between the sexes and the rights of women. Uruguay has worked on these issues by taking steps in two fields of action that are and have been priorities since the founding of our nation and which provide a basis from which the remaining steps can be taken.

The first of these involves the right to life, an essential right without which either there are no other rights or there is no point in establishing them. In this area Uruguay has stressed the reduction of infant mortality, and our success is eloquently shown by the statistics. Infant morality has been dropping precipitously since 1985, and at the end of this year the total reduction will have reached 50 per cent. Based on the estimates of the Ministry of Public Health, the rate will have been brought to 14 per thousand by the end of 1999.

When we talk about infant mortality we are talking about saving the lives of children of low-income households and of very young mothers. We have achieved these rates through training programmes carried out by the staff of the Ministry of Public Health. Above all our success stems from the fact mothers have come to understand that by managing the early stages of their pregnancies their babies' lives can be preserved. In addition, I note that in Uruguay 90 per cent of births take place in hospitals. This entire campaign aimed at improving infants' health has been supplemented by a programme to audit maternal mortality in order to better identify the causes and achieve lower rates.

The second basic area in which Uruguay has taken action has been education, even though historically our country has had the highest literacy rates in our region, reaching 96 per cent. That is to say that only 4 per cent of the population, primarily adults, do not know how to read or write.

Since the end of the last century our country has had a State-supported primary education system, which is based on the principles of free, secular and obligatory education. In recent years the emphasis has been on pre-school education. By the year 2000 we hope that all children four years old and above will be able to attend school. Uruguay will thus be providing 11 years of obligatory education to all its citizens.

When we talk about educational reform, in fact we are talking about the gigantic efforts that the entire country is today carrying out so that children born in the humblest, poorest households will have access to full schooling, to kindergarten, to food provided at school and to free textbooks — things that their own homes often cannot provide.

The mobilization of resources to achieve the fundamental goals of human development is a topic that the international community will have to resolve. In Uruguay we note with satisfaction that we have achieved positive results that encourage us in this task. This has been the result of a praiseworthy effort made to apply and promote the recommendations of the Cairo Programme of Action concerning first and foremost the formulation of adequate policies, the proper administration of resources and the promotion of

partnership involving not only governmental entities but also civil society and non-governmental organizations.

It should be noted that, in Uruguay, investments in the social sector — particularly in the areas of health and education — have increased considerably. This has been achieved through a policy to promote the sustained growth of the gross domestic product and the strict control of public expenditure, in addition to a reduction in the rate of inflation, which has already dropped to a one-digit average. These actions have allowed us to make substantial progress towards eradicating poverty, which, according to the index of unsatisfied basic needs, was reduced by 40 per cent in the urban areas.

As to the rights of women, Uruguay achieved early equality between the sexes, propagating laws that constitute pioneering legislation in the region. We are concerned, however, by the increase in teenage pregnancy. The reproductive behaviour of adolescents is also of increasing interest throughout the world, due fundamentally to the number of young people beginning sexual activities early, as reported by the United Nations Population Fund. We need an adequate policy to educate adolescents and to protect their sexual and reproductive lives.

We wish to note that the state organization for family-planning services represents a great innovation for Uruguay and reflects the degree of awareness that the country has achieved of the need to respect sexual and reproductive rights.

Population problems cannot be explained in terms of population size alone; we must also measure the extent of the lack of access to the opportunities offered by development and the shortage of basic human necessities, such as health, housing and education, *inter alia*. This is the reality that our country wishes to communicate to this international meeting and the experience that we would share with the international community, in the deep conviction that we are moving in the right direction and respecting and promoting the fundamental rights of human beings.

Finally, and without prejudice to the foregoing, Uruguay wishes to stress yet again the key and ongoing role of the family in the education and development of the human individual and society.

The President (*spoke in Spanish*): I now give the floor to His Excellency Mr. Nabil Salameh Al-Zenat, Secretary-General of the National Population Commission of Jordan.

Mr. Al-Zenat (Jordan) (*spoke in Arabic*): Allow me at the outset to offer our sincere thanks to you, Sir, the Secretary-General, the Chairman of the Committee on Population and Social Development and the members of the preparatory committee for this special session to review and appraise the implementation of the 1994 International Conference on Population and Development (ICPD) Programme of Action.

As the world approaches the third Millennium, it has seen great changes at the international level in different areas of human development and improvements in the quality of life. It has also seen progress in the social and economic spheres, the heart of sustainable development. This special session to review and appraise the implementation of the ICPD Programme of Action, widely attended by the policy-makers, high officials and experts of many countries and international organizations, embodies the interest that we all share in maintaining and implementing all the ICPD objectives.

Population and development issues are of great interest in Jordan at the political, institutional and popular levels. The political leadership, under His Majesty King Abdullah Bin Al Hussein, has accorded great importance to measures in the field of population at the local, Arab and international levels. The late King Hussein was one of six leaders of Islamic States who signed the Secretary-General's statement on population on 10 December 1996.

His Majesty always believed that the human being is the most precious of all the elements of development. In his letter to the 1984 International Conference on Population, held in Mexico City, he stated that the real challenge is to strike a balance between limited resources and unbridled population growth.

Mr. Mungra (Suriname), Vice-President, took the Chair.

Her Royal Highness Princess Basma devotes much energy to Jordan's population problems, foremost among which are illiteracy, unemployment, poverty and women's issues. All of these activities provide clear evidence of the great importance which we accord the population, development and environmental factors.

Jordan hosted the Arab Conference on Population in April 1993, which issued the Amman Declaration on

Population and Development in the Arab World, representing the unified position of the Arab countries towards the issues raised at the ICPD in Cairo. We also participated in the Arab Ministerial Conference on Population and Development in Beirut in 1998.

Jordan has devoted much attention to population issues because of its high rates of population growth arising from the forced immigration we faced in the 1940s and from high fertility, which have contributed to increased illiteracy and poverty. These put heavy pressure on the provision of basic services.

We have taken many steps to implement the recommendations of the ICPD. We reconstituted the national commission in 1995, increasing the membership from 16 to 21 in order to include a number of representatives of the volunteer organizations. We renamed the commission to make it the main body responsible for all population activities and information.

The Council of Ministers approved a national population strategy in 1996. We have reviewed an updated the strategy, including the necessary amendments, together with some of the recommendations set forth in the ICPD Programme of Action. The population indicators have also been modernized, using social and demographic surveys such as the 1997 survey of population and family health. In this connection, we benefitted from the results and conclusions of other international conferences.

The Jordanian Ministry of Health made an official commitment to provide free health care for mothers and children as part of a comprehensive national plan. Jordan has also developed a programme for pre-marriage medical exams as a preventive strategy. Twenty-eight health centres have been set up for that purpose.

The National Population Commission has also undertaken many studies to identify the different trends with regard to family planning, and husbands and wives in Jordan and to ascertain the opinions of the leaders of Islamic learning and to obtain their guidance in the areas of population and family planning. We set forth a national strategy for information, education and communication as regards family planning in our five-year plan for 1997-2002.

In 1996, we established the Jordanian Parliamentary Committee on Population and Development, made up of eight members of parliament, which provides support to all programmes and activities in that field. We have integrated population objectives into our economic and social development plans for 1999-2003. The National Secretariat on Population has also participated in preparing a five-year plan for 1999-2003 for the sector of labour and the work force, and the National Population Commission has also taken part in implementing the national campaign, "Working Together for a Happy Family", which targets male leaders in local communities. Furthermore, our project on spacing of births has embarked on a campaign to involve working men in the private sector.

We are conducting scientific research on which to base our population strategies and policies for the future. This research includes studies on reproductive health policies and on financing family planning in Jordan in both the public and private sectors. In both 1997 and 1998 Jordan was named the most outstanding country in the Asia/Middle East region for its population and health programmes and activities undertaken within the framework of the programmes of the United States Agency for International Development in the region.

From our experience, we can summarize the main obstacles to implementing the recommendations of the ICPD as follows: a lack of awareness and knowledge of the different elements affecting gender issues, reproductive health and equality and fairness between the sexes; traditional habits and customs which negatively impact reproductive health and family planning, such as the preference for male babies and marriage between blood relatives; a reluctance to accept health examinations before marriage; a lack of training centres for family planning; lack of adequate national data bases for hospitals; poor organization of and coordination between health bodies and between donors in the population field; and the absence of a national plan for continuity in family planning services in case of suspension of donor contributions to various projects. Furthermore, the fact that the Jordanian Government has to allocate 25 per cent of its gross domestic product for debt servicing affects health and social programmes, especially reproductive health programmes, constitutes a great obstacle in the way of implementing the recommendations of the ICPD.

We sincerely hope that this special session will contribute further to the implementation of the recommendations of the ICPD so that a balance can be struck between population growth and the requirements of development and so that population issues can be integrated into development planning.

In conclusion, I wish the special session, the many experts from international bodies and, in particular, the United Nations Population Fund, every success in agreeing on a common denominator in the interests of all peoples, so as to increase their prosperity and improve their standards of living everywhere.

The Acting President: I now give the floor to His Excellency Mr. Carlos Santos, Chairman of the delegation of Belize.

Mr. Santos (Belize): On behalf of the Government and people of Belize, I thank you, Sir, for giving me the opportunity to address this special session of the General Assembly and would like to express our warmest greetings to all the participating countries. Our sincere congratulations go to the Executive Director of the United Nations Population Fund (UNFPA), to Mr. Opertti on his election as President of the General Assembly and to all those involved in the planning and organization of this special occasion. We feel privileged to be able to evaluate in a systematic manner our progress since the 1994 International Conference on Population and Development (ICPD).

Belize is located in Central America, bordered on the north and north-west by Mexico, on the west and south by Guatemala and on the east by the longest barrier reef in this hemisphere, and it has a land area of approximately 9,000 square miles. The 1998 mid-year estimate put the country's population at around 240,000 people. Although the land area and population size indicate a small country with a low population density, there are many problems associated with this situation. As reported in 1994, Belize continues to be an oasis of peace, justice and economic opportunity in this region. This environment attracts migrants, not only from neighbouring countries, but also from as far away as Asia. On the other hand, our country is confronted with a continuing stream of educated Belizeans migrating to more developed countries in North America and Europe. I must point out, however, that my Government, through the Ministry of National Security, has recently made the decision to develop a comprehensive migration policy to address both immigration and emigration.

As an example of its respect for human rights, and to ensure the social and economic integration of immigrants, Belize is presently implementing an amnesty programme. So far, almost 16,000 people, the vast majority of whom are poor, have applied for permanent residency. Unofficial estimates place the total number of immigrants in Belize at 40,000, which represents approximately 17 per cent of our population. We stand as a beacon in the world of what a small country can do to assist the less fortunate among its neighbours. However, Belize's past and present actions, although humane, continue to put a strain on our already fragile economy, our social services and our environment. We will undoubtedly need the assistance and support of our partners in development to help us to cope.

Although my country continues to experience a high population growth rate of around 2 per cent per annum, a large part being due to a natural increase, I am happy to report that the total fertility rate of Belizean women has decreased from 4.7 per cent to around 4.0 per cent over the past five years. We admit, however, that this rate is still unacceptably high, since in many cases the high fertility rate is not the result of choice but of the lack of awareness and the lack of availability of family planning services. My country has taken steps to address this issue. A national health plan addresses the need for a comprehensive reproductive health programme and includes a family planning component that targets both male and female adults and youth. The goal of these reproductive health programmes continues to be what it was in 1994: a choice in family planning matters and a reduction in incidences of maternal mortality and morbidity, sexually transmitted disease and high birth rates among teenagers.

A disease of great concern to Belize, as to many other developing countries, is AIDS. Since 1994, when the rate of HIV/AIDS cases was 3.7 cases per 10,000 persons, the rate has climbed to 9.4 per 10,000 in 1998. This is an alarming situation that requires immediate and sustainable intervention. My Government is committed to developing a comprehensive AIDS policy that will arrest the growth of this scourge. This policy is being drafted in partnership with civil society, the private sector and our international partners in development and commands my Government's highest priority.

One of the important areas addressed by the ICPD Programme of Action, and in which I am proud to say Belize has made considerable progress, is that of gender equality, equity and empowerment. Belize firmly subscribes to all international conventions dealing with this subject, and in this regard my Government clearly states that

> "One of the tests of a society's value is the status its women enjoy. Where poverty prevails,

where unemployment is rife and 'opportunity' has a hollow sound, it is women who bear the brunt of the suffering. Until women are empowered to define and control their own destiny without being subject to discrimination and abuse, Belize can never be considered a just and democratic society."

Some of the steps taken which demonstrate my Government's commitment to this subject include the completion of a Gender Equity and Equality Strategic Plan in 1999; the passing of a Sexual Harassment Act in 1996, together with its supporting structures; the creation of a Domestic Violence Unit in the police department to ensure that women and children are treated with sensitivity; the passing of a Families and Children Act in 1998; the Married Persons (Protection) Act, which addresses the issue of marital rape; and the strengthening of the Women's Department.

In 1998, my Government inherited a situation of an unacceptably high unemployment rate — approximately 20 per cent — among women. We are committed to changing this situation. We can report that through programmes which offer training in non-traditional areas such as computer technology, and others that ensure access to capital, women are being encouraged to become entrepreneurs and hence economically empowered. The recently established Small Farmers Bank reports that 37 per cent of its loans, totalling 29 per cent of disbursements, were made to women. A recently concluded agreement with the Inter-American Development Bank and our Social Investment Fund has earmarked over a million dollars for micro-enterprise development, 50 per cent of which must be targeted towards women.

My Government has also clearly stated its commitment to increase the number of women in key leadership positions in the public service and other public bodies. Its goal is for 30 per cent of all appointees to be women.

In the area of national policies and plans of action pertaining to population and development, Belize is proud to say that, in keeping with its commitment to this body in 1994, it now has a Population Unit established within the Ministry of Human Development, Women and Youth, and a draft National Population and Development Policy. The policy addresses all the priority issues identified in the ICPD+5 review. It will shortly be disseminated across all sectors of our society, in the form of workshops and consultations, to encourage the people's input. The Population Unit participates in relevant forums and committees to ensure the integration of population variables in the national planning process.

To facilitate the Population Unit's work and to ensure a holistic and integrated approach to the development process in general, my Government, with the assistance of our national and international development partners, is actively promoting mechanisms that will establish more dialogue and closer collaboration among the social sector ministries.

In concluding, although Belize has made considerable progress in the implementation of the ICPD Programme of Action, considerable constraints have also been experienced, important among which are inadequate human and financial resources. The Government of Belize, in its far-reaching vision, construes these as challenges rather than obstacles. My Government reiterates to this body the commitment we made when we took office in August 1998 to improve the economic and social well-being of all Belizeans and to honour and abide by all our international commitments and obligations. This is no easy feat and will undoubtedly require the cooperation, assistance and support of the international community, among which the United Nations stands tall.

The Acting President: I give the floor to His Excellency Mr. Joseph Demas, Chairman of the delegation of Papua New Guinea.

Mr. Demas (Papua New Guinea): May I, through you, Sir, extend my gratitude and felicitations to the Secretary-General, His Excellency Mr. Kofi Annan, for his keen interest in and support for the International Conference on Population and Development (ICPD).

Before I outline the efforts undertaken and the problems encountered by Papua New Guinea in implementing the ICPD Programme of Action, may I take this opportunity to convey the sincere apologies of my Minister for Treasury and Planning, The Honourable Mr. Iairo Lasaro, M.P., who was to have led the Papua New Guinea delegation but could not avail himself due to other pressing political commitments at home. He has, however, expressed his wish for a successful outcome of the special session of the General Assembly on ICPD and pledges his Government's support and commitment to its implementation.

I am happy to announce that Papua New Guinea has made some progress in the implementation of the 1994 ICPD Programme of Action, but much is yet to be done.

The Government, in collaboration with respective stakeholders, is currently reviewing our National Population Policy, which envisages to reflect changing local and global trends and conditions. The revised policy is expected to be multi-sectoral in nature and scope and will be operational by October 1999.

I am pleased to inform the Assembly that relevant policy guidelines, institutional capacity-building initiatives and the collation and analysis of appropriate data are in their progressive stages.

The constitution of Papua New Guinea recognizes gender equality and equity, empowering women to be actively involved in all forms of political, social and economic activity for a better quality of life and an improvement in their living standards. In 1994 the Government endorsed the National Women's Policy, which is aimed at improving and increasing the position and participation of women in our society, both as agents and beneficiaries in the development process. Other efforts have been made to promote women's participation in national development and decision-making vis-à-vis membership in the provincial and local-level governments.

After the Cairo Conference, the National Department of Health, in collaboration with other Government agencies, the private sector, civil society and donors, prepared our fourth National Health Plan, which encourages a fundamental shift in the way health services are delivered to Papua New Guineans living in urban and rural areas.

In implementing this plan, and consistent with the International Conference on Population and Development Programme of Action, a number of initiatives have been undertaken. Among others these include the promotion of training and awareness in the areas of reproductive health, family planning, sexual health and safe motherhood, as well as the establishment of a national HIV/AIDS council to initiate and implement policy and programmes to combat this dreadful disease.

The Government in 1995 endorsed the non-governmental-organization policy that gave legitimacy and recognition to the positive role of churches in the delivery of health, educational and other social services. The Government stands ready to support and encourage this important ongoing commitment.

Although progress has been made in some areas, there remain issues that hinder our intentions and efforts to implement effectively the ICPD Programme of Action. These issues include the need to improve the capacity and effectiveness of the formal institutional mechanisms for coordinating and monitoring the national population programmes in the country. Gaps remain in terms of statistics and research required for integrated population and development planning.

Widespread inequality between males and females still exists in the areas of economic participation and decision-making. The national women's policy and the non-governmental-organization policy have not been broadly publicized or fully implemented.

The existing high maternal, infant and child mortality rates need to be reduced to acceptable levels. There is a need to address immediately the reproductive health needs of young people and adolescents that were previously overlooked by the maternal and child health programmes. The prevalence of complications related to sexually transmitted disease and HIV/AIDS needs to be seriously addressed so as to avoid their impact on the Papua New Guinea economy and the country as a whole.

There is need to provide technical and financial support to the civil society to encourage participation in population and development. The private sector must be encouraged to be more involved in implementing the Programme of Action on reproductive health, family planning and sexual health.

Some of the progress that we have made would not have been possible without external support and assistance. I take this opportunity to express our appreciation and gratitude to the United Nations system, the World Bank, the Asian Development Bank, the Australian Government and others who have been partners in this process.

Papua New Guinea wishes to reiterate that, in order to effectively and successfully implement the good intentions of Cairo and the outcome of this special session on Cairo+5, governmental and international support and cooperation is a must. This, we believe, is an affirmative commitment that should generate coherent political will and leadership if the dreams and aspirations expressed in the ICPD Programme of Action are to be realized.

In conclusion, I am pleased to reaffirm the commitment of the Papua New Guinea Government to continue with the implementation of the ICPD

Programme of Action within the limits of our resources and of the support provided by the international community.

The Acting President: I now give the floor to His Excellency Mr. Afonso Van Dunem "Mbinda", chairman of the delegation of Angola.

Mr. Van Dunem "Mbinda" (Angola): Due to a conflicting commitment, our Minister for Planning could not be here today. I apologize for this. I address the Assembly on her behalf.

May I begin by congratulating the President, on behalf of my Government, for presiding over this special session of the General Assembly dedicated to the issues of population and development. May I also take this opportunity to express our appreciation for the work done by Mrs. Nafis Sadik at the helm of the United Nations Population Fund. My Government is committed to continuing to support and encourage her initiatives aimed at improving the living conditions of peoples, particularly in developing countries.

There is little data available on the Angolan population. For almost 29 years now we have been unable to carry out a general census of the population throughout the whole territory. Present figures in this domain are limited and not very reliable. This has been for many years a matter of concern for my Government, for it hampers our ability to plan and implement social- and economic-development programmes.

The ongoing war, which has ravaged the country for more than 30 years, is the main reason behind the non-implementation of a demographic policy in Angola. The Government is forced to divert large amounts of the financial as well as the human resources needed to fund social and economic programmes to protect the civilian population against terrorist actions.

The instability is also preventing us from taking advantage of the enormous economic potential of the country to benefit the people. Thus the instability is contributing to today's unprecedented economic crisis, which has plunged about 65 per cent of the Angolan population below the poverty line.

Just to give you a picture of the tremendous consequences of the crisis upon the population, allow me to cite some figures. The health indicators have fallen dramatically over the last years. The maternity mortality rates are between 1,200 and 1,500 for 100,000 births, one of the highest in the world.

The mortality rate for infants and children under five years is also high, and the average life expectancy is one of the lowest in the world: 42.4 years.

As far as education is concerned, about 2.3 million children are not part of the school system because of the destruction of most of the educational infrastructure, the abandonment of their areas of origin and because of poverty. Over the past 25 years, the Angolan population has doubled from 5.6 million in the 1970s to roughly 13 million in 1995. However, due to the war, this increase has brought about imbalances in the concentration of human settlements. While vast portions of territory are becoming empty, others like the capital, Luanda, which alone gives shelter to 2 to 3 million inhabitants, cannot support the constant waves of displaced persons. Women and children make up most of the 1.8 million internally displaced persons in Angola. Also, as a result of the war, more than 100,000 people have become incapacitated and are desperately in need of training programmes for their social reintegration.

In order to attenuate the effects of the economic crisis and within the framework of the fourth programme of cooperation between the Government and the United Nations Population Fund (UNFPA) for the period 1997-2000, my Government set as a priority the implementation of recommendations issued at the Cairo Conference with regard to access to reproductive health care, including family planning, gender equality and the integration of strategies on population and development.

So far, the following actions have been taken: the strengthening of the maternity health-care system, including the setting-up of family-planning agencies; the passing of legislation to promote gender equality; the inclusion of social and demographic factors as integral parts of all development programmes, in particular the programme for stabilization and economic recovery, mid-term 1998-2000, and the creation of a special agency to deal with population matters within the Ministry of Planning; the integration of the main components of reproductive health and the prevention of sexually transmitted diseases, including HIV/AIDS; the introduction of population courses at Agostinho Neto National University; the introduction of family education in the curriculum of public schools; the preparation of a national conference on population, to be held in the year 2000; and, last but not least, the implementation and

decentralization of two local population programmes in two of the most populated provinces, Benguela and Huila. My Government is very grateful for the support provided by UNFPA for these activities and stands ready to reinforce this cooperation.

It is our belief that the goals set forth in the Cairo Programme of Action can be attained only in a concerted manner and through the mobilization of the necessary financial and human development resources, as well as through national capacity-building. The role and support of the relevant international institutions will be crucial if the main objectives of the Programme of Action — the creation of conditions for a partnership between non-governmental organizations and the Government; the reinforcement of programmes aimed at facilitating women's access to productive activities as a way to promote gender equality and to advance the status of women; and the improvement of children's access to school, with a view to eradicating illiteracy — are to be achieved.

Finally, let me appeal to the donor countries to continue to support financially the activities of UNFPA so that the Cairo Programme of Action can be a reality, especially in our developing nations.

The meeting rose at 9.05 p.m.